(b) if so, the details thereof; and

(c) by when Government propose to issue order to all the CGHS dispensaries not to refuse such prescriptions of CGHS Medical Centre?

THE MINISTER OF HEALTH AND FAMILY WELFARE (DR. ANBUMANI RAMDOSS): (a) and (b) Prescription of Medical Centre, Parliament House Annexe which is exclusively meant for Hon'ble Members of Parliament and Ex-Members of Parliament and their family members are properly attended to by CGHS dispensaries in Delhi. No complaint in this regard has been received.

(c) In view of (a) & (b) above, the question does not arise.

Quality treatment in AIIMS

1863. SHRI SANTARAM LAXMAN NAIK: Will the Minister of HEALTH AND FAMILY WELFARE be pleased to state:

(a) whether the quality of medical services at the All India Institute of Medical Science is affected in the last few months;

(b) whether the AIIMS has turned into a "Political Hub";

(c) the problems identified by Government, if any, in the institute; and

(d) the action proposed to be taken?

THE MINISTER OF HEALTH AND FAMILY WELFARE (DR. ANBUMANI RAMDOSS): (a) to (d) There have been breakdown in the patient care services at the All India Institute of Medical Sciences during the month of May and July, 2006, due to the strike by doctors. The role of Director in handling the situation to ensure proper patient care services and functioning of the Institute under him was considered by the Institute Body at its meeting held on 5.7.2006. The Institute Body passed a resolution that it would be in the public interest to terminate the term of Director of the Institute. However, the recommendation of Institute Body has been stayed by Delhi High Court. The matter is subjudice.

The Ministery has set up an expert Committee under the Chairmanship of Dr. M.S. Valiathan to study the functioning of AIIMS and to make recommendations for further development of the Institute.

Community Health Centres in Madhya Pradesh

†1864. SHRI PYARELAL KHANDELWAL: Will the Minister of HEALTH AND FAMILY WELFARE be pleased to state:

(a) whether it is a fact that much publicized "National Rural Health Mission" programme seems to be successful on papers only and it has made no impact on health centres located in the remotest rural areas;

(b) whether it is also a fact that aversion/unwillingness of doctors towards villages is one of the main reasons behind failure of the above programme;

(c) whether Government propose to provide lump-sum financial assistance to the State Government for Community Health Centres as per Indian public health standards under above programme; and

(d) if so, the details of such community health centres proposed for Madhya Pradesh alongwith the details regarding funds provided/sanctioned in this regard?

THE MINISTER OF HEALTH AND FAMILY WELFARE (DR. ANBUMANI RAMDOSS): (a) No, Sir. The National Rural Health Mission (NRHM) is being implemented all over the country. The Mission seeks to provide accessible, affordable, accountable, effective and reliable primary health care facilities, especially, to the poor and vulnerable sections of the population. The Mission was launched on 12th April 2005. The first year of Mission is the preparatory phase during which the institutional mechanisms for the implementation of the Mission have been laid down. At the same time, a number of activities under the umbrella framework of NRHM has been implemented.

(b) Availability of manpower is rural areas is a challenge before the NRHM. The various states have taken several initiatives to over come the shortage of doctors in rural areas including compulsory rural/difficult area posting as prerequisite for admission to PG courses, rational posting policies and compulsory rotation of doctors on completion of prescribed tenure, Contractual appointment of doctors etc.

†Original notice of the question was received in Hindi.